

DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. underneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

ANTI-SLIP GLASS FIBRE-REINFORCED PLASTIC-PLATE

and for which a patent application:

- ☒ is attached hereto and includes amendment(s) filed on *11/10/83*
☐ was filed in the United States on *11/10/83* as Application No. *08/111,111* with amendment(s) filed on *11/10/83*
☐ was filed as PCT International Application No. *83/011,111* on *11/10/83* and was amended under PCT Article 19 on *(N/A)*.

I hereby state that I have reviewed and understood the contents of the above-identified application, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

| EARLIEST FOREIGN APPLICATION(S), IF ANY, FILED PRIOR TO THE FILING DATE OF THE APPLICATION | | | |
|--|---------|--------------------------------------|---|
| APPLICATION NUMBER | COUNTRY | DATE OF FILING (day, month, year) | PRIORITY CLAIMED |
| DE 101 51 191.3 | Germany | 04 November 2003 | YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> |

I hereby claim the benefit under Title 35, United States Code, §119(e) of any United States provisional application(s) listed below.

| APPLICATION NUMBER | FILING DATE |
|--------------------|-------------|
| | |

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

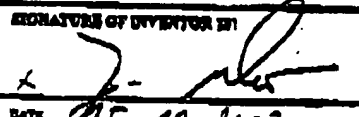
| APPLICATION SERIAL NO. | FILING DATE | STATUS | | |
|------------------------|-------------|----------|---------|-----------|
| | | PATENTED | PENDING | ABANDONED |
| | | | | |

POWER OF ATTORNEY: As a named inventor, I hereby appoint H.T. Tran (Reg. No. 38,432), Graham M. Coleman (Reg. No. 39,434), and Ronald C. Harris, Jr. (Reg. No. 41,901), whose address is Fusion Executive Center, 3201 New Mexico Avenue, N.W., Suite 150, Washington, D.C. 20016, as my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

DOCKET NO. MTL-004

| SEND CORRESPONDENCE TO: | | Tao H.T. Tran Law Group 3201 New Mexico Avenue, N.W., Suite 450 Washington, D.C. 20016 | | DIRECT TELEPHONE CALLS TO: (202) 343-2610 | |
|-------------------------|-------------------------|--|-------------------------------------|--|-------------------|
| 301 | FULL NAME OF INVENTOR | LAST NAME Worm | FIRST NAME Josephine | MIDDLE NAME | |
| | RESIDENCE & CITIZENSHIP | CITY Bechtelsdorf | STATE OR FOREIGN COUNTRY Germany | COUNTRY OF CITIZENSHIP Germany | |
| | POST OFFICE ADDRESS | STREET Furweg 2 | CITY Bechtelsdorf | STATE OR COUNTRY Germany | ZIP CODE 93699 |
| 202 | FULL NAME OF INVENTOR | LAST NAME | FIRST NAME | MIDDLE NAME | |
| | RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | |
| | POST OFFICE ADDRESS | STREET | CITY | STATE OR COUNTRY | ZIP CODE |
| 203 | FULL NAME OF INVENTOR | LAST NAME | FIRST NAME | MIDDLE NAME | |
| | RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | |
| | POST OFFICE ADDRESS | STREET | CITY | STATE OR COUNTRY | ZIP CODE |
| 204 | FULL NAME OF INVENTOR | LAST NAME | FIRST NAME | MIDDLE NAME | |
| | RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | |
| | POST OFFICE ADDRESS | STREET | CITY | STATE OR COUNTRY | ZIP CODE |
| 205 | FULL NAME OF INVENTOR | LAST NAME | FIRST NAME | MIDDLE NAME | |
| | RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | |
| | POST OFFICE ADDRESS | STREET | CITY | STATE OR COUNTRY | ZIP CODE |
| 206 | FULL NAME OF INVENTOR | LAST NAME | FIRST NAME | MIDDLE NAME | |
| | RESIDENCE & CITIZENSHIP | CITY | STATE OR FOREIGN COUNTRY | COUNTRY OF CITIZENSHIP | |
| | POST OFFICE ADDRESS | STREET | CITY | STATE OR COUNTRY | ZIP CODE |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like as made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of the patent issuing thereon.

| | | |
|---|--------------------------|--------------------------|
| SIGNATURE OF INVENTOR 01  | SIGNATURE OF INVENTOR 02 | SIGNATURE OF INVENTOR 03 |
| DATE 05.10.2003 | DATE | DATE |
| SIGNATURE OF INVENTOR 04 | SIGNATURE OF INVENTOR 05 | SIGNATURE OF INVENTOR 06 |
| DATE | DATE | DATE |